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Bib Data Sheet

CONFIRMATION NO. 7848

SERIAL NUMBER 09/730,299	FILING DATE 12/05/2000 RULE	CLASS 705	GROUP ART UNIT 2161 3626	ATTORNEY DOCKET NO. healre01.012	
APPLICANTS Kenneth H. Falchuk, Newton, MA; Jose A. Halperin, Brookline, MA;					
** CONTINUING DATA ***** THIS APPLICATION IS A DIV OF 08/818,155 03/14/1997 PAT 6,256,613 } OK 2P WHICH IS A CIP OF 09/410,377 09/30/1999 PAT 6,293,808					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 12/20/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance Verified and <u>APass</u> Acknowledged <u>MR</u> Examiner's Signature Initials		STATE OR COUNTRY MA	SHEETS DRAWING 3	TOTAL CLAIMS 18 4	INDEPENDENT CLAIMS 2 1
ADDRESS 000025247					
TITLE Medical consultation management system					
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		